



Elder Abuse Statistics In Queensland

YEAR IN REVIEW 2022–23



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Executive Summary

The *Elder Abuse Statistics in Queensland: Year in Review* report presents analyses of data collected from calls to the Elder Abuse Prevention Unit (EAPU) Helpline in Queensland. The EAPU is funded by the Queensland Department of Child Safety, Seniors and Disability Services to respond to elder abuse.

Progressing towards a society in which older people live free from abuse and neglect requires greater understanding around experiences of elder abuse and factors associated with victimisation. Statistics presented in this report provide insight about elder abuse reported to the Helpline and may benefit prevention and intervention efforts. The report contains data about individual factors (victims and perpetrators), relationship factors, community factors, abuse presentation, impact of the abuse, and barriers to change.

Further information about the data contained in this report is available in the *Elder Abuse Statistics in Queensland: Companion Document*.

KEY FINDINGS



4,501

Calls



2,652

Abuse
Notifications

Types of
abuse victims
experienced

74.8%

PSYCHOLOGICAL

64.7%

FINANCIAL

24.7%

NEGLECT

24.3%

SOCIAL

13.1%

PHYSICAL

0.5%

SEXUAL

67.1%

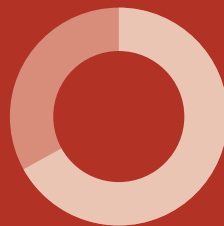
EXPERIENCED MORE THAN
ONE TYPE OF ABUSE



The most common age
group for victims was

80-84

YEARS (22.1%)

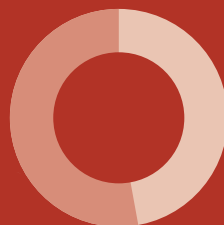


67.2%

of victims
were female

35.5%

of victims had
impaired capacity



50.9%

of perpetrators were male



The most common age
group of perpetrators was

50-54

YEARS (17.5%)

35.7%

of perpetrators were daughters

35.7%

of perpetrators were sons

13%

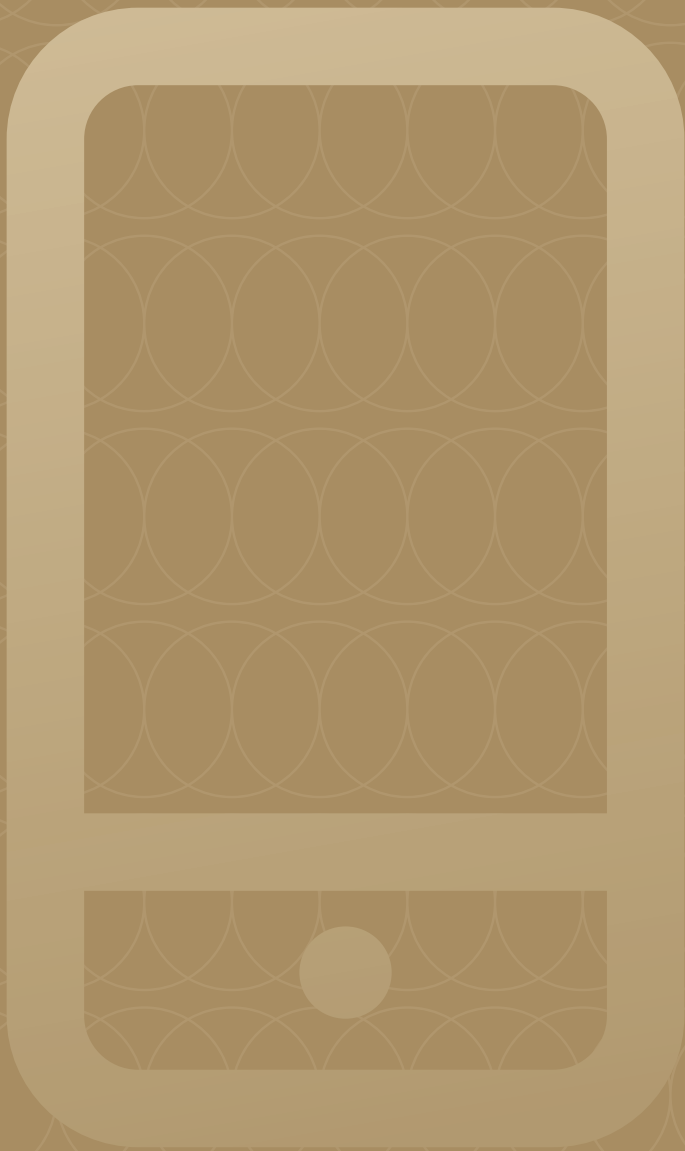
of perpetrators were partners



Recommendations

- Further research into facilitators and inhibitors of help-seeking would likely be beneficial. Many people do not contact the Helpline until they reach breaking point. Gaining knowledge about facilitators and inhibitors of help-seeking would assist initiatives for early intervention.
- Further research into the neglect of older people is warranted. Year-on-year, increases have been recorded in the proportion of cases in which neglect is reported. The National Elder Abuse Prevalence Study (Qu et al., 2021) also identified that neglect was the type of abuse with the second-highest prevalence. Despite this, little research into neglect occurring outside Australian residential aged care facilities has been done. Further research would help to better understand this phenomenon and guide prevention and intervention efforts.
- The development and implementation of a service model that includes support for perpetrators should be considered. Many older people experiencing abuse ask for support for perpetrators. They want the abuse to stop, but are unwilling to implement strategies that may result in negative consequences for perpetrators. Increased concern about consequences relating to perpetrator safety, homelessness, and finances was identified in 2022–23. Including support for perpetrators as an aspect of providing elder abuse services would likely reduce barriers and lead to better outcomes for victims of elder abuse. For example, securing alternative accommodation for a perpetrator would likely alleviate a victim's concern about the perpetrator becoming homeless, and increase the victim's willingness to take action that results in the perpetrator moving out of their home.





SECTION 1.

Total Call Data

This section describes notifications, what prompted the call, and referrals made.

Notifications

The Helpline received a total of 4,501 calls in the 2022–23 financial year. The total calls were 17.2 per cent ($n = 661$) higher than recorded in 2021–22. The calls comprised 2,652 abuse notifications and 1,849 enquiry calls. An increase of 13.4 per cent ($n = 314$) in the number of abuse notifications was recorded (Figure 1).

There were 2,431 cases of abuse in close or intimate relationships and 598 cases of abuse in consumer and social relationships (Figure 2). The number of cases is higher than the number of calls as more than one abuse relationship may be identified within a single call.

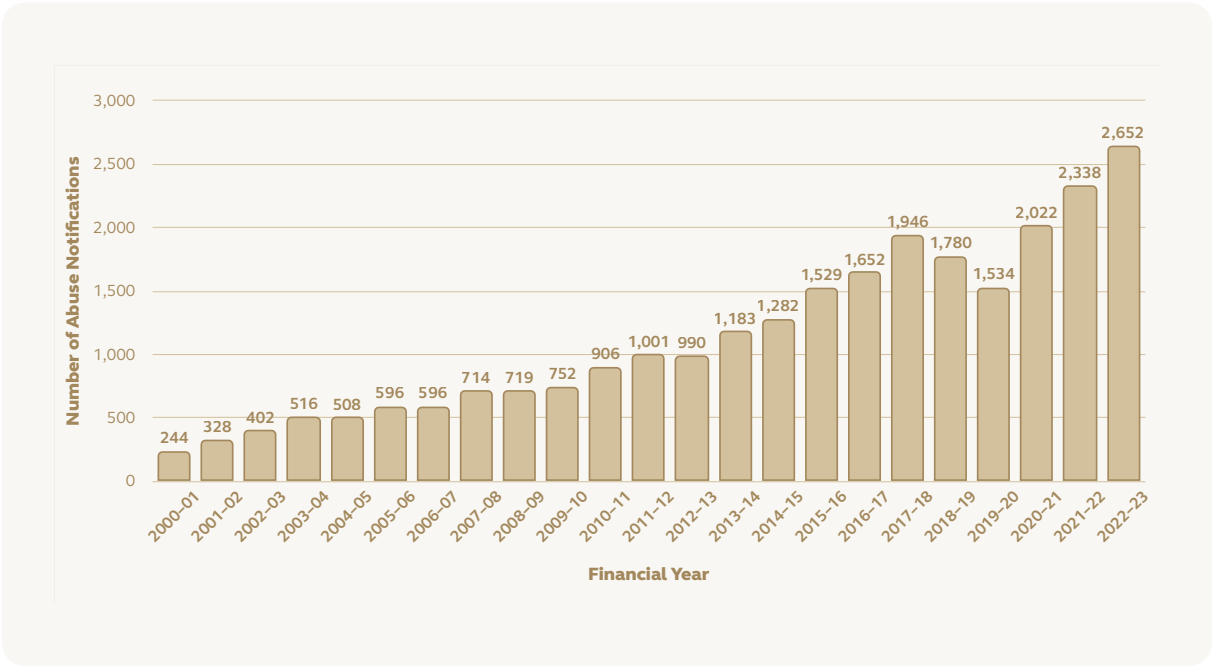


Figure 1. Total abuse notifications by financial year.

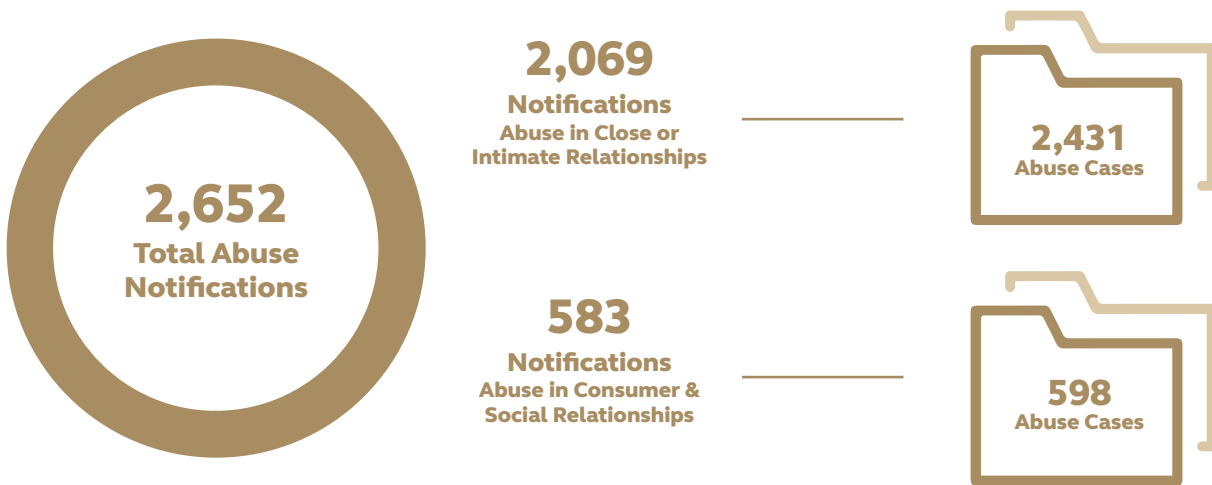


Figure 2. Notifications received in the 2022–23 financial year.

What Prompted the Call?

The PEARL database allows users to record what prompted the caller to phone the EAPU.¹ This information was recorded for about half of the calls ($n = 2,384$, 53.0%).

The most frequently recorded call prompt was that the caller had reached breaking point (Figure 3).

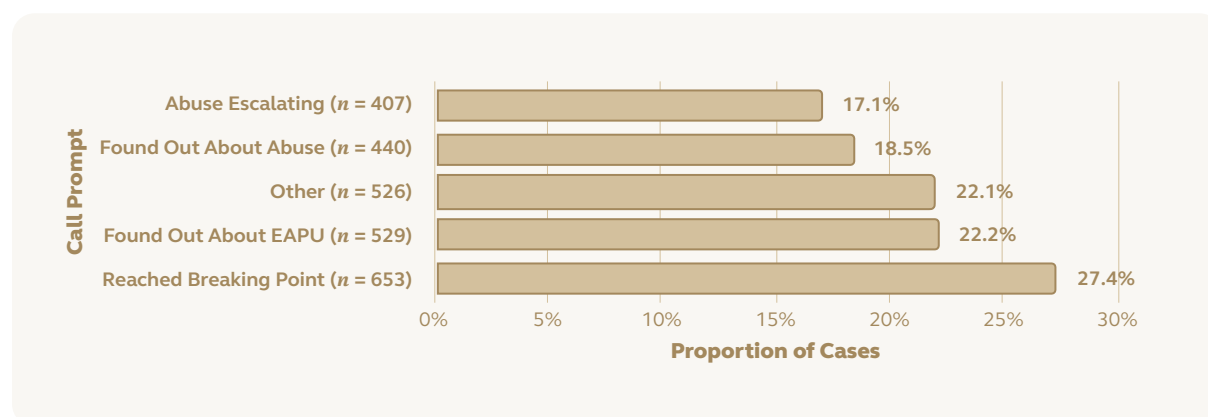


Figure 3. What prompted callers to contact EAPU (where known).

Referrals

Callers were referred to other services in 66.9 per cent ($n = 3,009$) of cases. The most common referrals were to legal services (Figure 4).

Two-thirds of referrals to legal services ($n = 670$, 64.5%) were to the Seniors Legal and Support Services (SLASS), which provides both legal and social-work support. Many victims of elder abuse are reluctant to initiate legal action against perpetrators, but some are more willing to engage when the legal and social-worker model employed by SLASS is described.

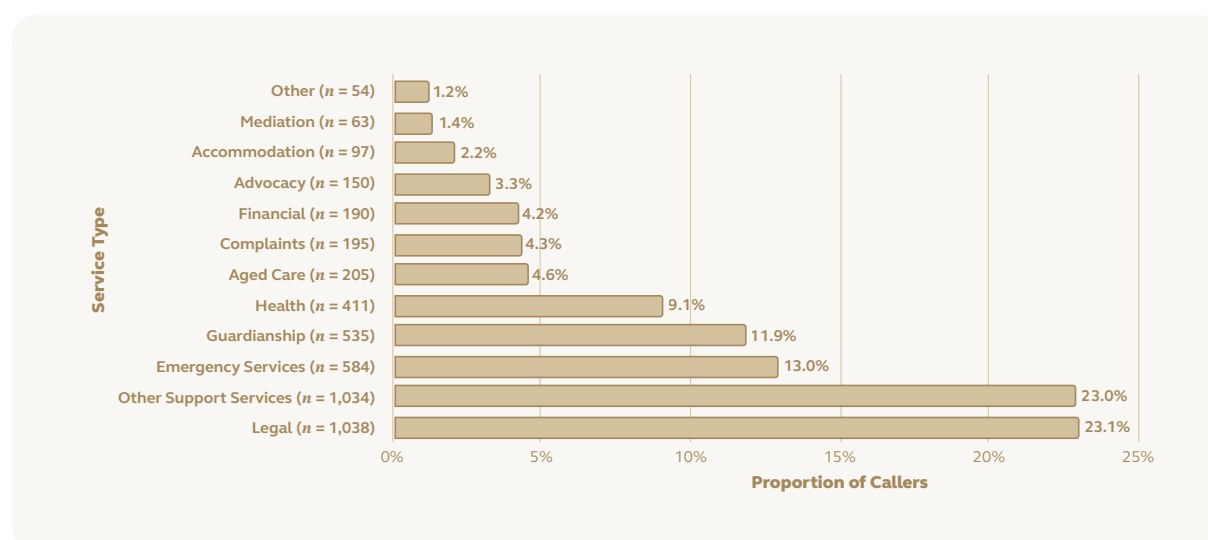


Figure 4. Types of services notifiers were referred to.

¹ Note. More than one option may be selected. For example, a victim may call because they believe the abuse is escalating and they have reached breaking point.





SECTION 2.

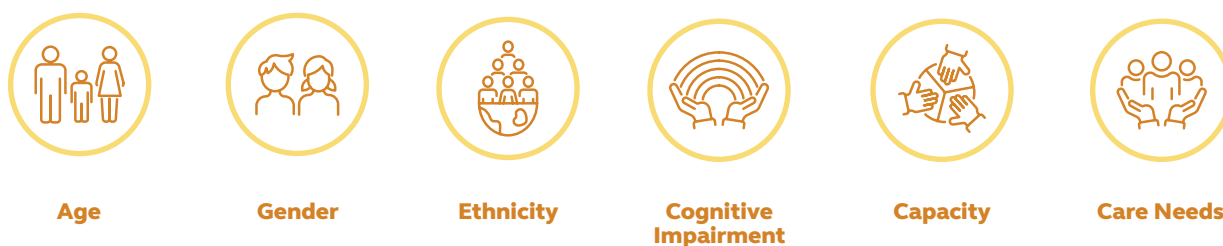
Abuse in Close or Intimate Relationships

SECTION 2.1.

Individual Factors for Victims

Individual factors or life circumstances may increase an older person's vulnerability and also influence their risk of experiencing abuse. Although these individual factors are not causal factors, they may be associated with an increased risk of experiencing victimisation. For example, victims of elder abuse are more often females; however, being female per se does not increase the risk. Rather, a complex combination of factors such as gender roles and women's longer lifespan may contribute to an increased risk of victimisation.

This section examines the role of the following individual factors:



Age

Victim age group was recorded in 79.1 per cent ($n = 1,923$) of cases but not for 20.9 per cent ($n = 508$). Similar to 2021–22, the most common age group was 80–84 years ($n = 425$). This group accounted for one-fifth of the total victims of known age (Figure 5).

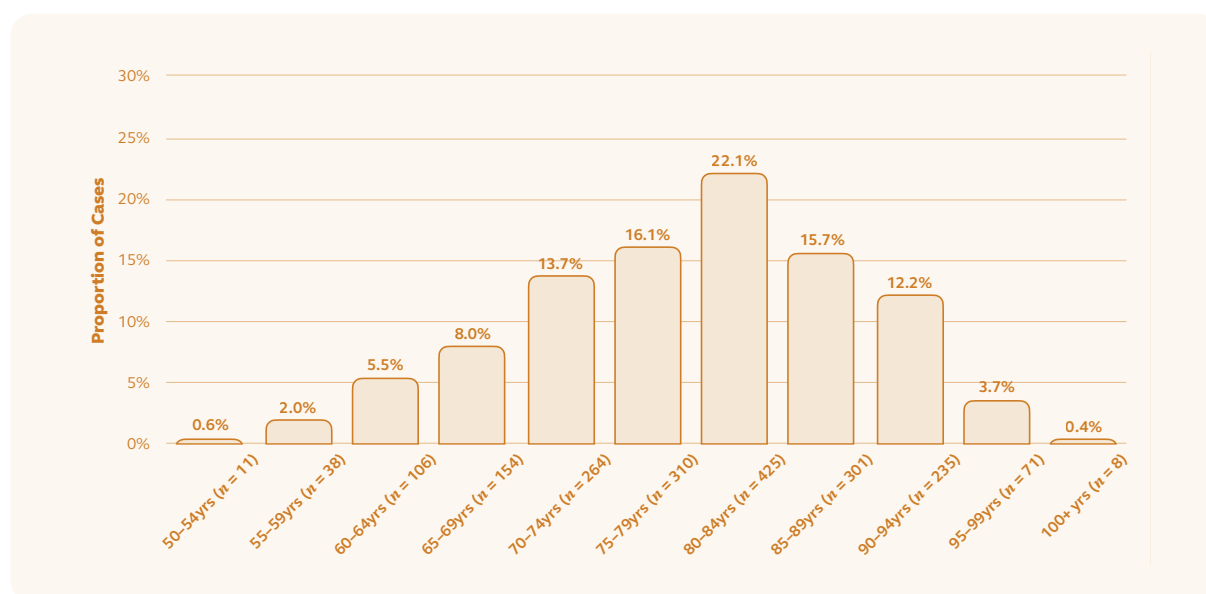
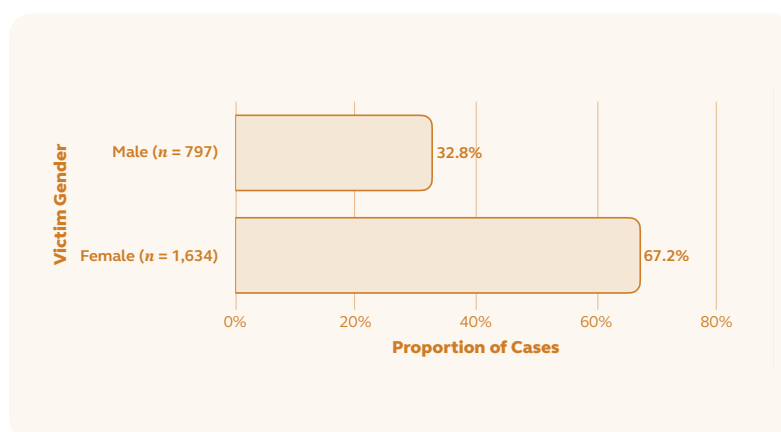


Figure 5. Age of victims ($n = 1,923$).



Gender

Similar to numbers in previous years, in 2022–23 there were more than twice as many female victims as male victims (Figure 6).

Figure 6. Gender of victims
(*n* = 2,431).

Ethnicity

Research suggests that race, ethnicity, and culture intersect with elder abuse in multiple and complex ways (Australian Law Reform Commission, 2017; Horsford et al., 2011). In particular, vulnerabilities and stressors associated with being a member of a minority or a marginalised ethnic group may increase the risk of elder abuse.

Aboriginal Peoples and Torres Strait Islander Peoples

In the 2022–23 reporting period, 107 victims (4.4%) identified as Aboriginal and/or Torres Strait Islander. This number is almost double the number that would be expected from population statistics (i.e. 2.4% of Queenslanders aged over 50 years identify as Aboriginal and/or Torres Strait Islander) (Australian Bureau of Statistics, 2022b).

Culturally and Linguistically Diverse (CALD) Communities

During the 2022–23 reporting period, 114 victims (4.7%) were recorded as having a CALD background, which is much lower than the number expected from population data (i.e. 13.9% of Queenslanders aged over 50 years have a CALD background) (Australian Bureau of Statistics, 2022a).

Cognitive Impairment

Cognitive impairment of victims was recorded in 430 (17.7%) cases. Dementia was the most frequently reported form of cognitive impairment, affecting 328 (11.7%) victims.

In 2018, it was estimated that 5.2 per cent of Australians aged 65 years and over had dementia (Australian Bureau of Statistics, 2020). In contrast, in the Helpline data, more than double this proportion had dementia (11.4%, *n* = 276 victims of similar age, where age was known).

Capacity

Impaired capacity was recorded for 863 victims (35.5%, where known). A further 136 (5.6%) were suspected to have impairment.² Capacity status was unknown for 107 victims (4.4%).

Care Needs

Victims were reported to require support in 1,458 cases (60.0%), with domestic, meals, and transport needs the most frequently reported areas in which support was required.

² Note. There can be differences in assessment and interpretation of capacity due to different frameworks being used (e.g. medical versus legal). Data recorded in PEARL is largely self-reported, which likely influences what is recorded and thus findings should be interpreted with caution.

SECTION 2.2.

Individual Factors for Alleged Perpetrators

This section covers key demographics of alleged perpetrators, as well as individual factors that are directly or indirectly associated with an increased risk of perpetrating elder abuse. Note these factors are not necessarily causal. Perpetrator age, gender, and psychological health are discussed.

Age

The age of perpetrators was unknown in 1,101 cases (45.3%), but the most common age group recorded was 50–54 years (Figure 7).

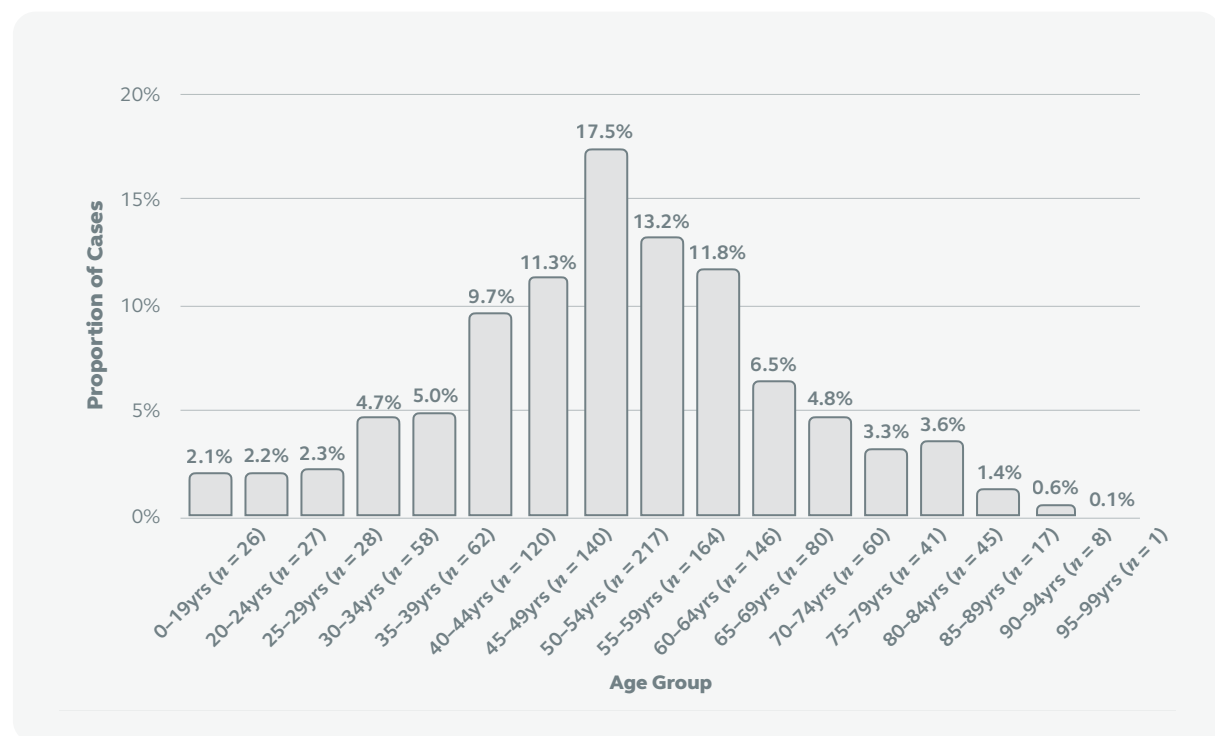
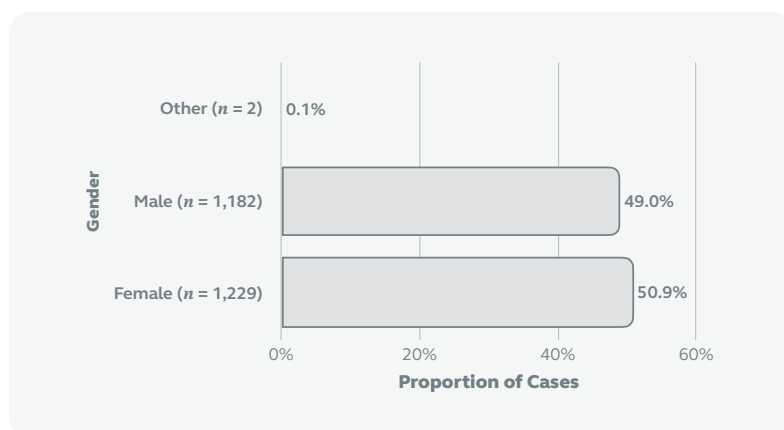


Figure 7. Age of perpetrators (n = 1,240).



Gender

Males ($n = 1,182$) and females ($n = 1,229$) were almost equally represented as perpetrators (Figure 8). Perpetrator gender was not recorded for 18 cases.

Figure 8. Gender of perpetrators ($n = 2,413$).

Psychological Health

Mental Illness

In 238 cases (9.8%), perpetrators were reported to have, or were suspected by notifiers to have, some form of mental illness.

Substance Misuse

Substance misuse by perpetrators was recorded in 308 (12.7%) cases.





SECTION 2.3.

Relationships Between Alleged Perpetrators and Victims

This section of the report examines relationships between victims and perpetrators, as well as any shared history or current factors that may influence their interactions. The section covers relationships, living arrangements, and the caring role.

Relationships

Family relationships accounted for 95.4 per cent ($n = 2,319$) of cases of abuse in close or intimate relationships. Sons and daughters were reported as perpetrators in almost three-quarters of cases ($n = 1,735$, 71.4%).³

Sons and daughters were equally represented as perpetrators (Figure 9). Further analysis revealed that 82 cases (2.4%) involved daughters-in-law and 81 cases (2.4%) involved sons-in-law.

Long-term conflict between victims and perpetrators was identified in 173 (7.1%) cases.

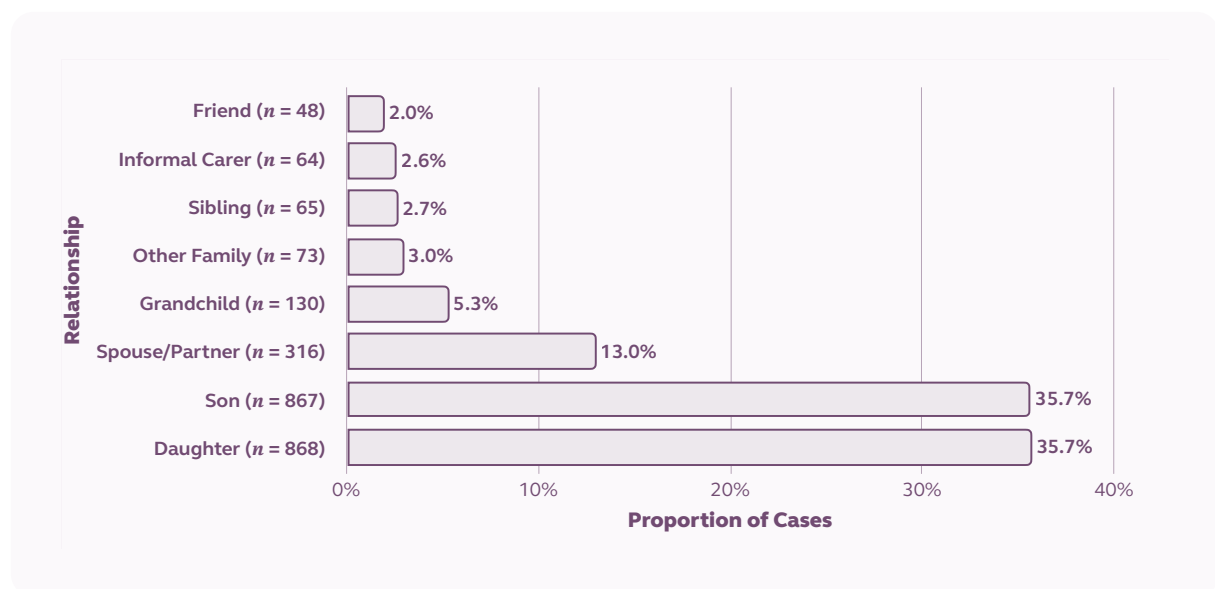


Figure 9. Relationship between perpetrator and victim ($n = 2,431$).

³ Note. This data includes non-biological relationships such as sons-in-law, daughters-in-law, and stepchildren.

Living Arrangements

Living with perpetrators is an established risk factor for elder abuse (Australian Law Reform Commission, 2017; Kaspiew et al., 2016). Overall, almost two-thirds of victims ($n = 1,482$, 63.9%) lived with perpetrators (where known) (Figure 10). In 332 of these cases, at least one non-perpetrator was also living with the victim.

In more than two-thirds of cases ($n = 1,004$, 67.7%) in which perpetrators lived with victims, perpetrators were sons ($n = 545$, 36.8%) or daughters ($n = 459$, 31.0%).

The proportion of cases in which victims and perpetrators live together has increased by 69.9 per cent over the past five years, while the proportion of victims living alone has decreased by 35.2 per cent (Figure 10). An upward trend in cohabitation and downward trend in living alone were present between 2018–19 and 2021–22. These trends have not continued in the 2022–23 financial year, with a slight decrease in the proportion of cases in which victims and perpetrators live together, and a sizable increase in victims living alone.

It is unclear why the proportion of victims living alone has increased, but it is worth noting that the increase in 2022–23 was not enough to reverse the longer-term trend of falling notification rates for victims who live alone.

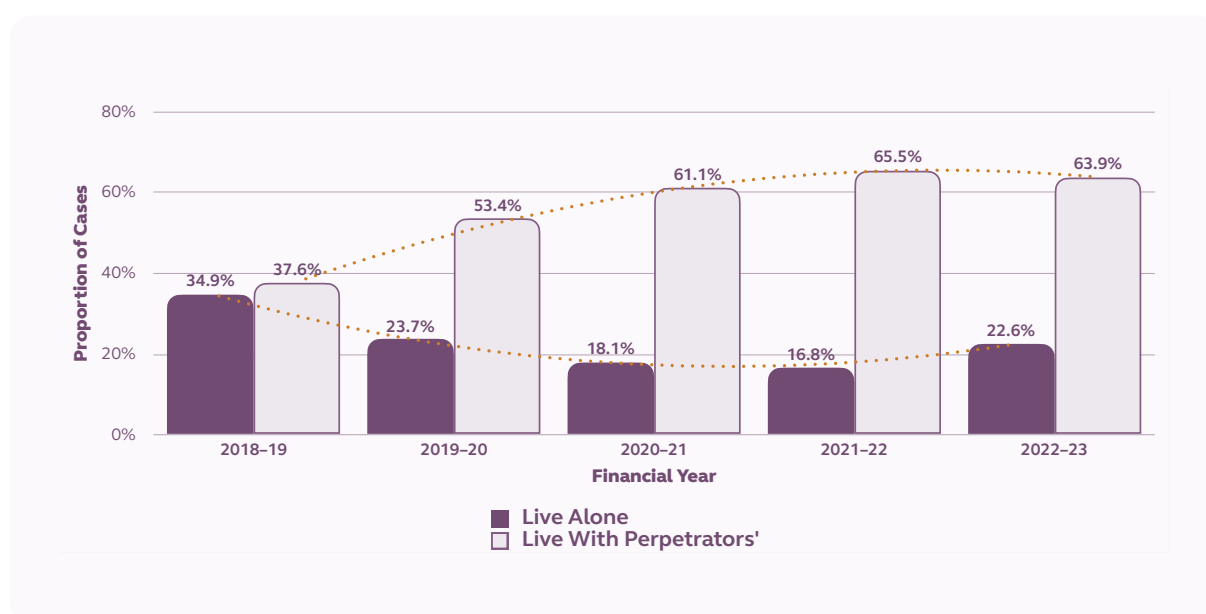


Figure 10. Comparison of victim and perpetrator cohabitation between 2018–19 and 2022–23.

The Caring Role

In 2022–23, 19.6 per cent ($n = 476$) of perpetrators were recorded as providing informal care to victims.

SECTION 2.4.

Community Factors

Community factors relate to the intersection of victim and perpetrator relationships with other family, friends, community members, and potential support networks, or with features of the community such as geographical location. This section discusses factors related to family and community, and geography.

Notifiers

In 2022–23, the largest group of notifiers were daughters ($n = 619$), followed by victims themselves and workers (Figure 11). Notifiers' relationships to victims were unknown for 10 cases.

Geography

Queensland has the second-largest land area of the Australian states and territories. Over half of the population lives outside the Greater Brisbane area, making Queensland mainland Australia's most decentralised state. Geographical distance and population spread can create issues for service access in rural and remote areas.

Victim Location

Victim location was known in 87.5 per cent of cases ($n = 2,126$). Figure 12 displays the number of victims in each region.⁴

In three regions, the number of calls increased disproportionately compared with 2021–22 data: Central Queensland (40.2%), Darling Downs–Maranoa (32%), and Mackay–Isaac–Whitsunday (28.9%). Moreton Bay–South was the only region to record a substantial decrease in calls (–26%).

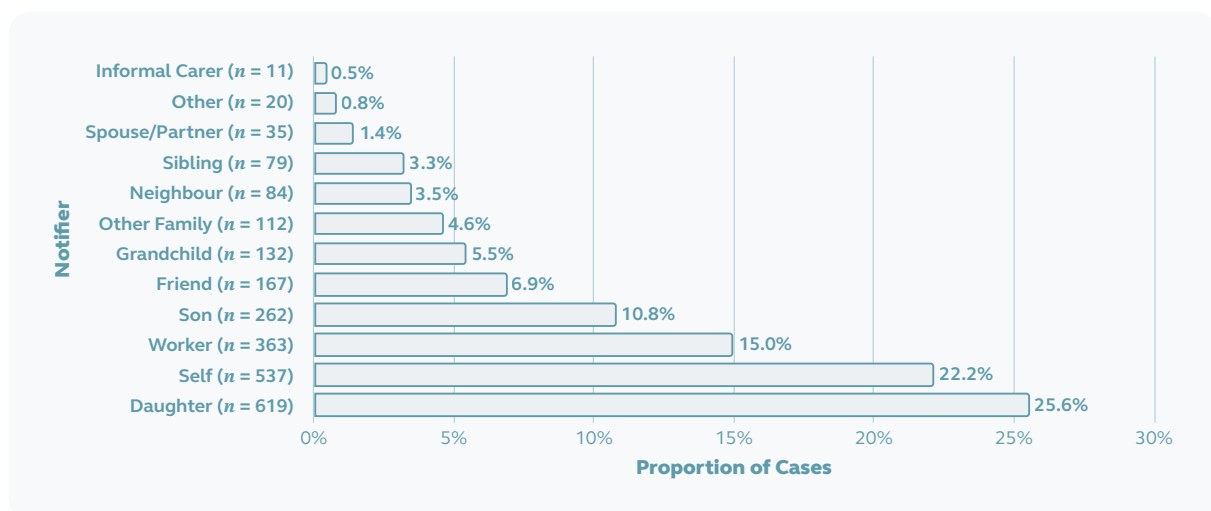
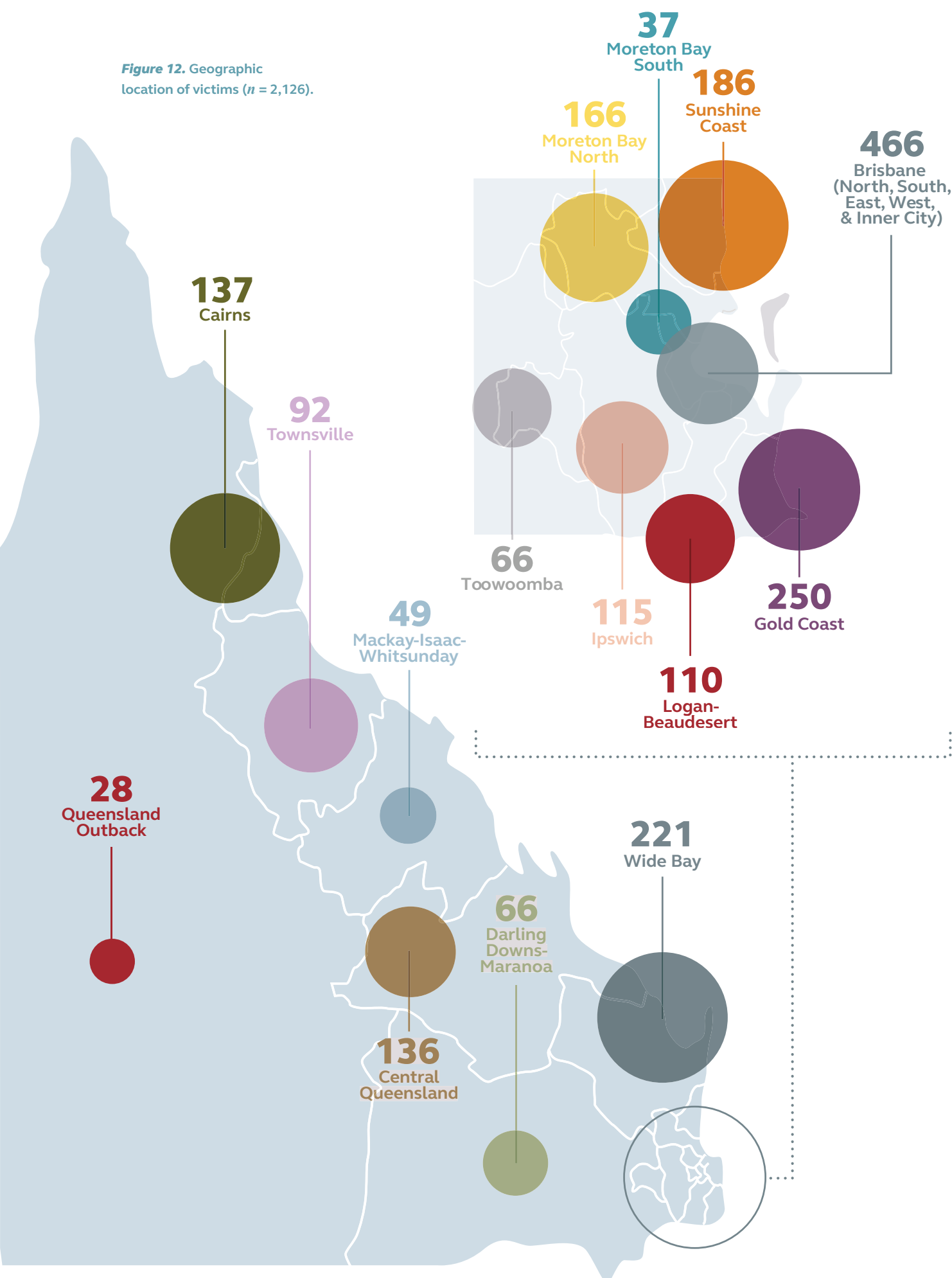


Figure 11. Notifier's relationship to victim.

⁴ Note. Data from Brisbane North, South, East, West, and Inner City were combined because Helpline workers sometimes record the suburb as Brisbane City if victims are reported to live in Brisbane without a specified suburb. This results in an over-representation of cases in the Brisbane Inner City region.

Figure 12. Geographic location of victims (*n* = 2,126).



Abuse Data

Consistent with findings from 2021–22, the two most frequently reported types of abuse were psychological and financial abuse (Figure 13).

Two-thirds of victims ($n = 1,630$, 67.1%) were reported to be experiencing more than one type of abuse.

An increase in the reported rate of financial abuse was observed between 2021–22 (62.1%) and 2022–23 (64.7%). However, the rate of financial abuse remains lower than in 2018–19 (67.7%) and 2019–20 (68.5%) (Figure 14).

The other abuse type that increased between 2021–22 and 2022–23 was neglect (22.9% vs 24.7%). Rates of neglect have consistently increased since 2018–19, when neglect was only recorded in only 17.4 per cent of cases (Figure 14).

The rate of social abuse declined between 2021–22 (27.8%) and 2022–23 (24.3%). Sexual abuse was also reported in a lower proportion of calls in 2022–23 (0.5%) than in 2021–22 (0.8%).

Psychological and physical abuse rates in 2022–23 were relatively similar to those in 2021–22, with only very small decreases recorded (Figure 14).

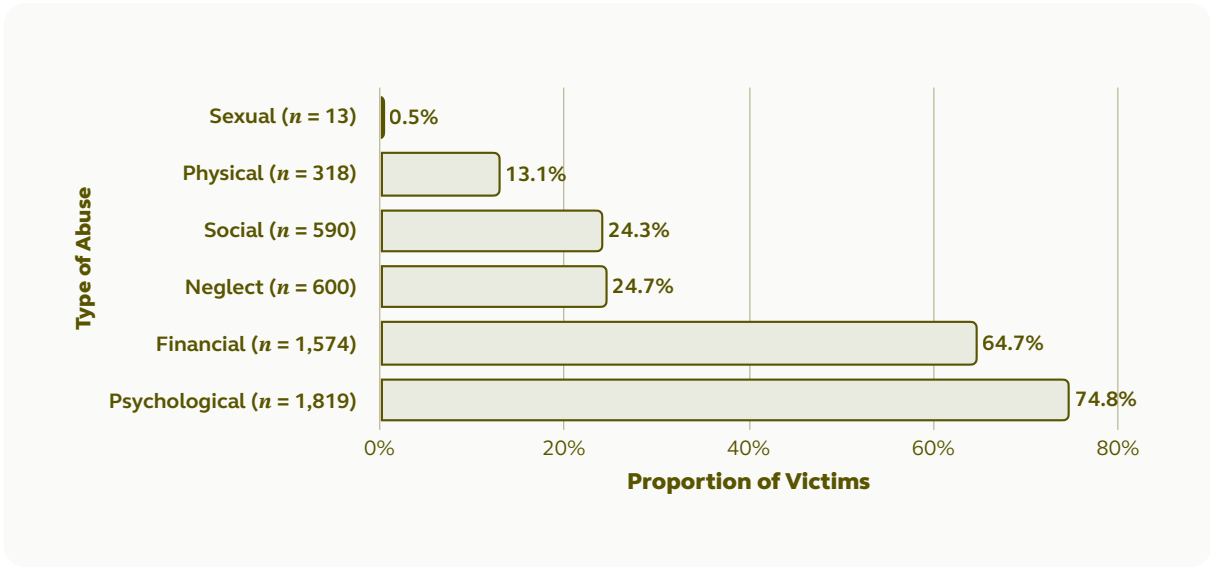


Figure 13. Proportion of victims by abuse type.



Figure 14. Proportion of victims by abuse type (2018–2023).

Financial Abuse

In 2022–23, 1,574 cases of financial abuse were reported to the Helpline.

Methods Used to Perpetrate Financial Abuse

The most common methods of perpetrating financial abuse were undue influence, misuse of an Enduring Power of Attorney (EPOA), and misuse of debit and credit cards (Figure 15).

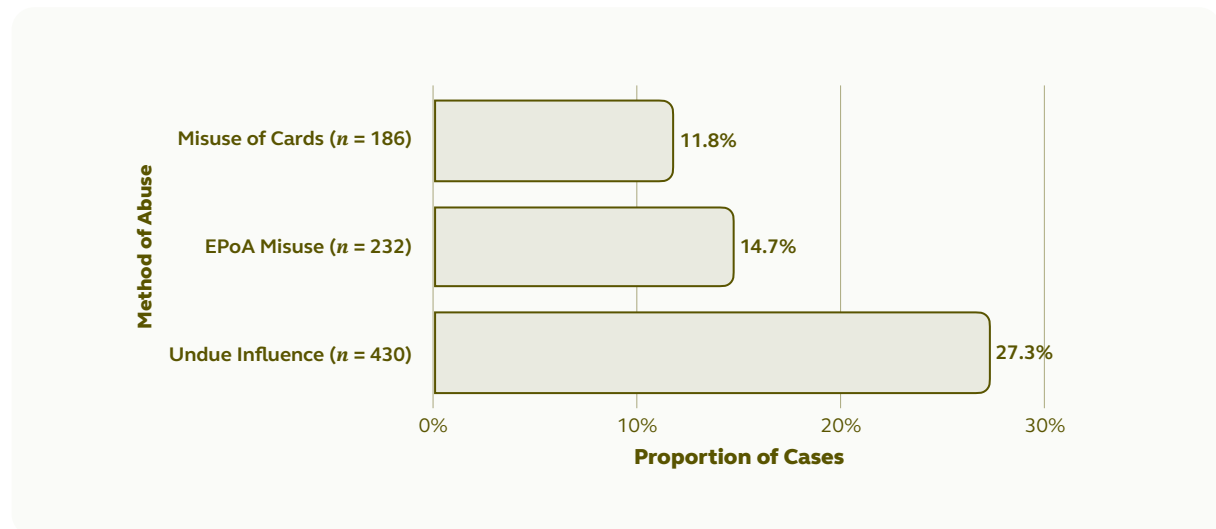


Figure 15. Methods of perpetrating financial abuse ($n = 1,574$).

Forms of Financial Abuse

The most common forms of financial abuse involved coercing the victim into gifting, non-contribution (for example, living with the victim and not contributing towards expenses such as electricity or groceries), and paying perpetrator's bills (Figure 16).

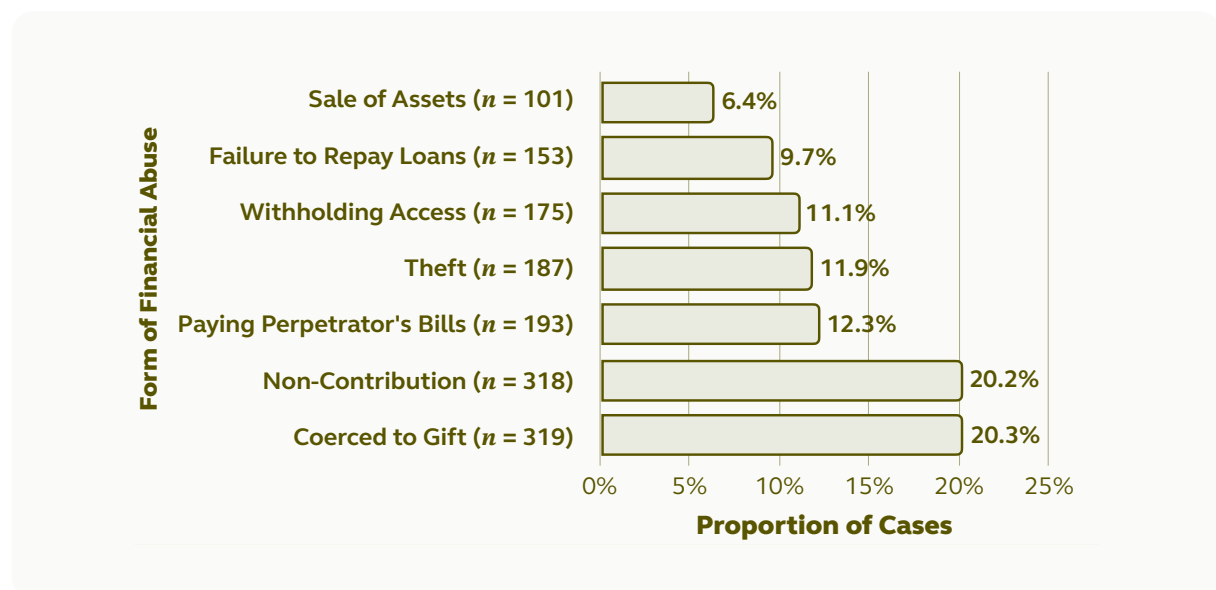


Figure 16. Forms of financial abuse ($n = 1,574$).

Neglect

In 2022–23, 600 cases of neglect were reported to the Helpline.

Failing to ensure victim safety, failing to take care of victim's medical needs, and failing to ensure victim's nutritional needs were met were the most frequently reported forms of neglect in 2022–23 (Figure 17).

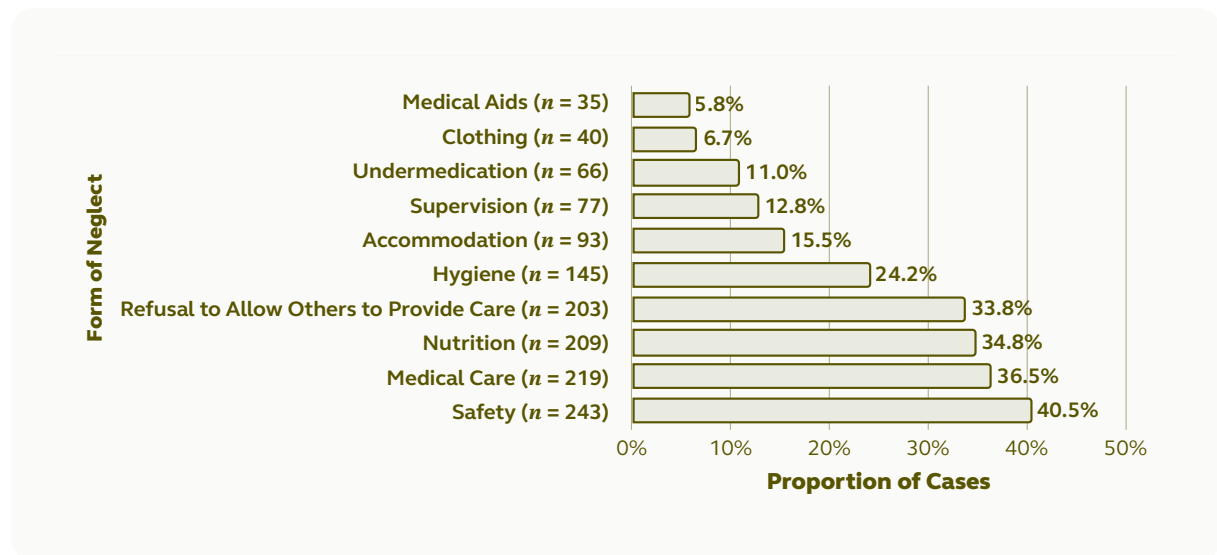


Figure 17. Forms of neglect ($n = 600$).

Physical Abuse

In 2022–23, 318 cases of physical abuse were reported to the Helpline.

The most frequently reported forms of physical abuse were striking, pushing, and rough handling (Figure 18).

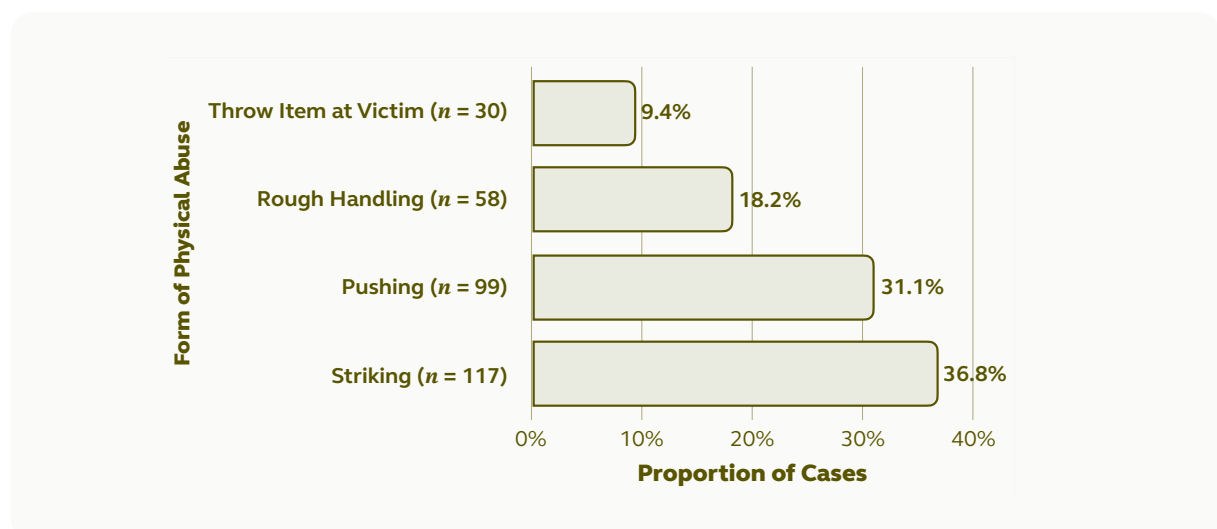


Figure 18. Forms of physical abuse ($n = 318$).

Psychological Abuse

In 2022–23, 1,819 cases of psychological abuse were reported to the Helpline.

The most common forms of psychological abuse were pressuring, shouting, and making threats (Figure 19).

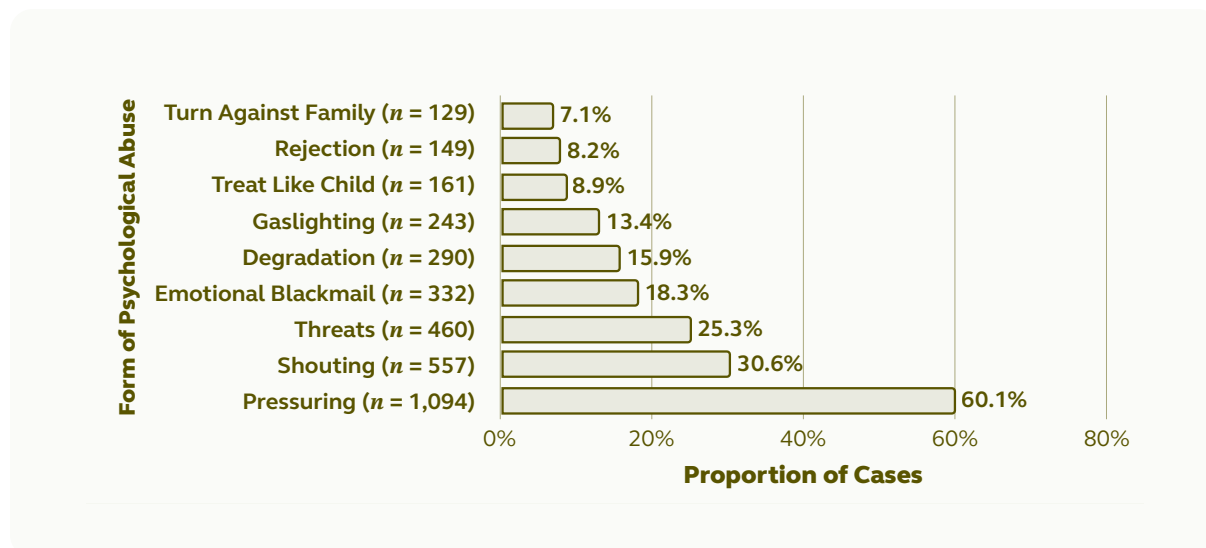


Figure 19. Forms of psychological abuse (n = 1,819).

The most common types of threats were threatening to harm victims, to send victims to residential aged care facilities, and to harm others (Figure 20).

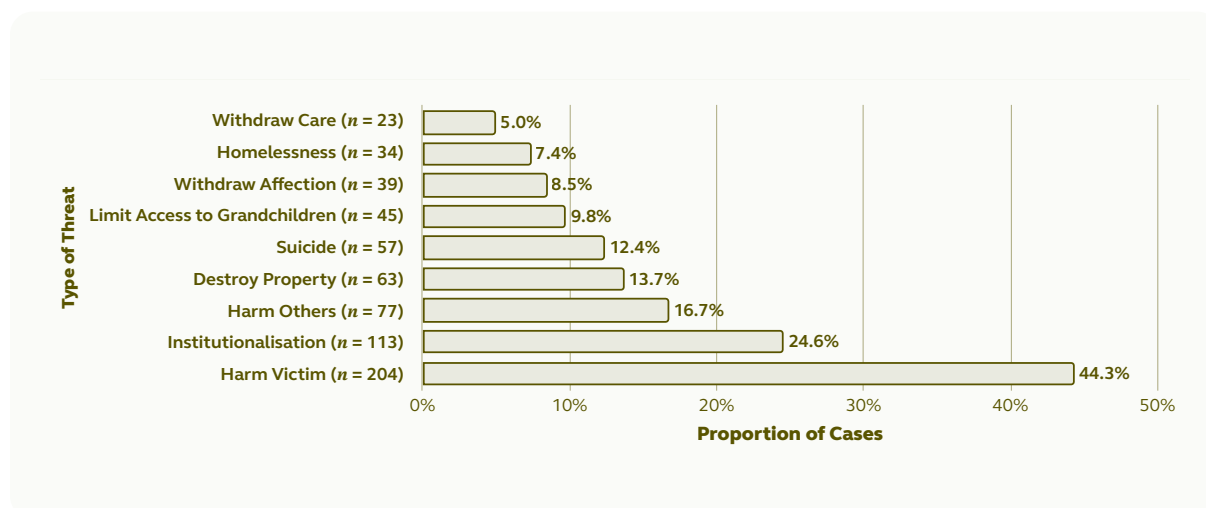


Figure 20. Types of threats experienced by victims (n = 460).

Sexual Abuse

In 2022–23, 13 cases of sexual abuse were reported to the Helpline.

The most frequently reported forms of sexual abuse were unwanted sexual comments, inappropriate touch, and unwanted touch (Figure 21).

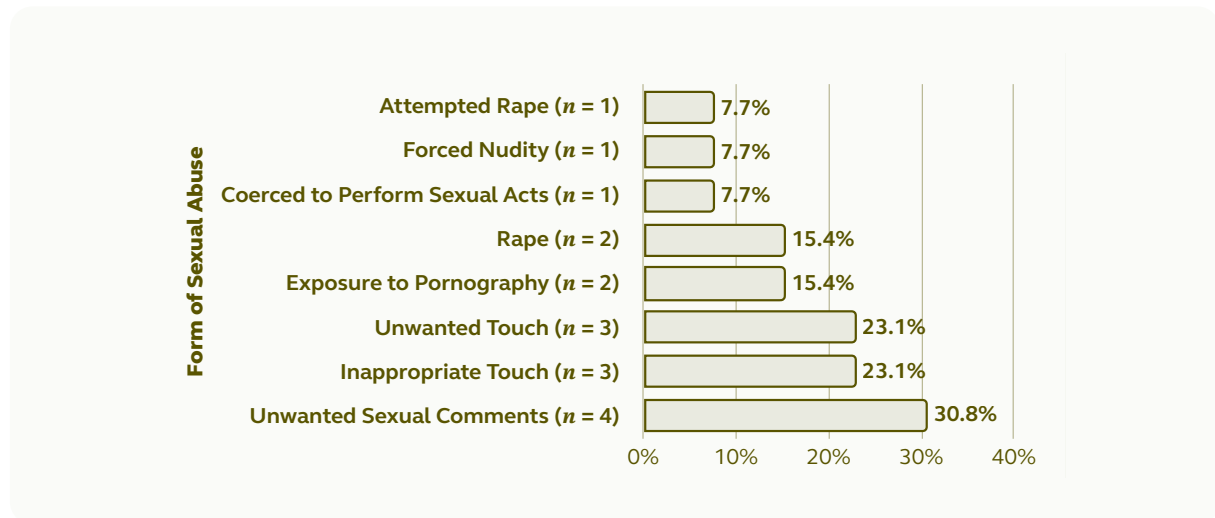


Figure 21. Forms of sexual abuse ($n = 13$).

Social Abuse

In 2022–23, 590 cases of social abuse were reported to the Helpline. The PEARL database allows Helpline operators to collect data on the methods used to perpetrate social abuse, along with the forms of social abuse.

Methods Used to Perpetrate Social Abuse

In 94 (15.9%) cases of social abuse, EPoA misuse was recorded as the method used to perpetrate the abuse.

Forms of Social Abuse

Restricting visitation by others, restricting access to a phone, and limiting the victim's ability to be alone with others were the most common forms of social abuse reported in 2022–23 (Figure 22).

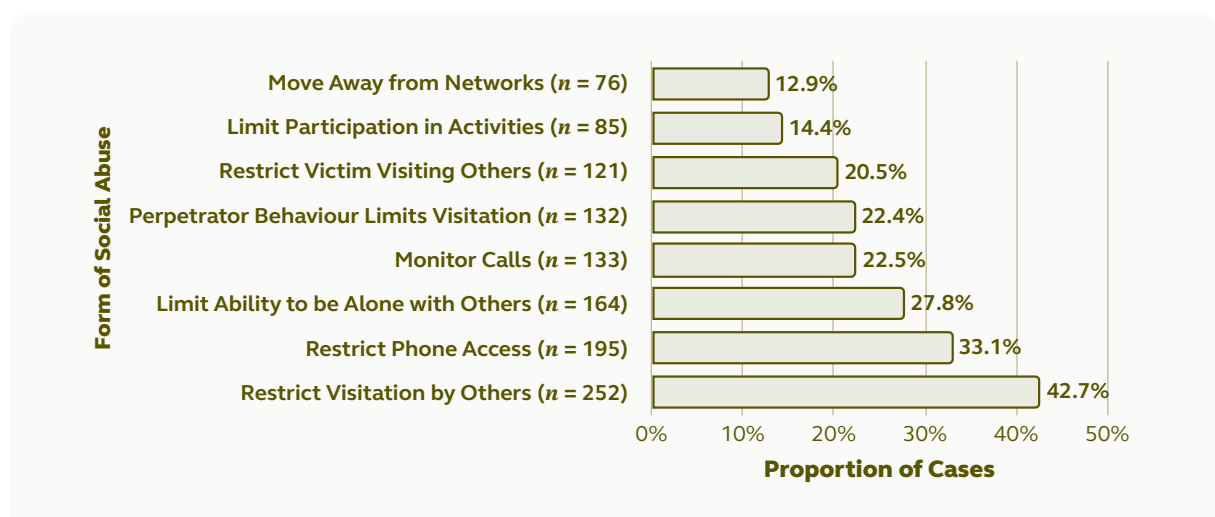


Figure 22. Forms of social abuse ($n = 590$).

SECTION 2.6.

Impact of the Abuse on Victims

Information about how abuse had affected victims was recorded in 1,506 cases (62.0%). Psychological, health, and relationship impacts were most frequently reported (Figure 23).

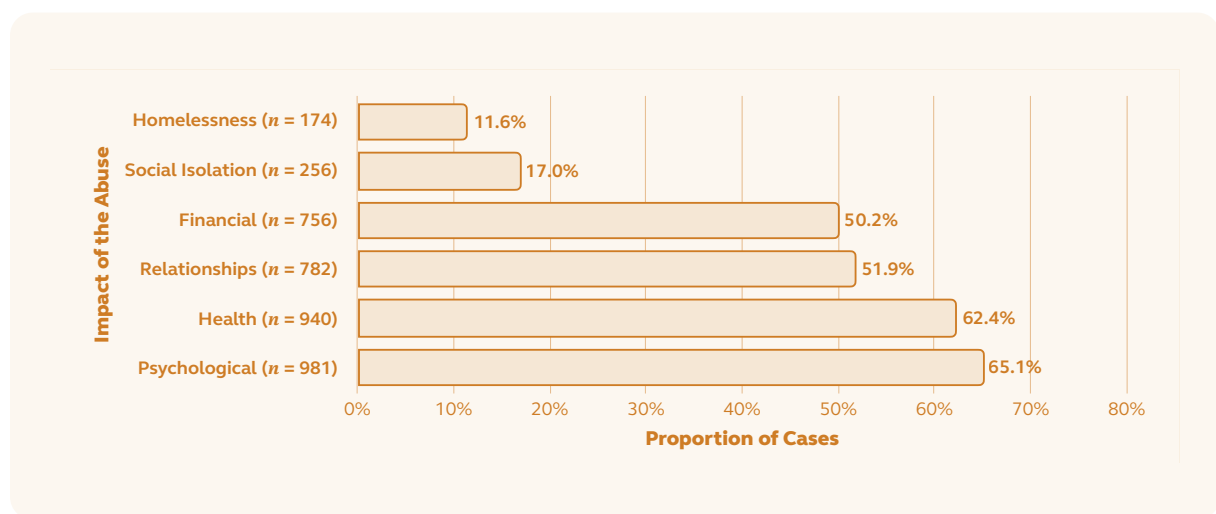


Figure 23. Impact of elder abuse on victims ($n = 1,506$).



SECTION 2.7.

Barriers to Change for Victims

Helpline operators can record data about barriers to a victim's ability or willingness to enact change regarding the abuse they are experiencing. Barriers to change were identified in almost two-thirds of cases ($n = 1,542$, 63.4%).

For simplicity and clarity of reporting, the 25 barriers to change have been grouped into six categories (factors) (Gillbard & Leggatt-Cook, 2022).⁵

1. Protecting the Perpetrator and Relationship
2. Fear of Further Harm
3. Impact on Relationships with Others
4. Available Resources
5. Shame or Stigma
6. Individual Vulnerabilities

Similar to 2021–22, the most common barriers to change for victims were protecting the perpetrator and their relationship with them, fear of further harm, and individual vulnerabilities (Figure 24).

Although protecting the perpetrator and their relationship with them was the most commonly reported barrier, the 51 per cent of cases in which barriers were recorded in 2022–23 is much lower than the 82.7 per cent recorded in 2021–22. The other notable difference was that in 2022–23 shame or stigma was recorded for 33.5 per cent of cases in which barriers were identified, which is much higher than the 23 per cent recorded in 2021–22.

See Table 1 for a full breakdown of factors and frequencies for the 25 data points.

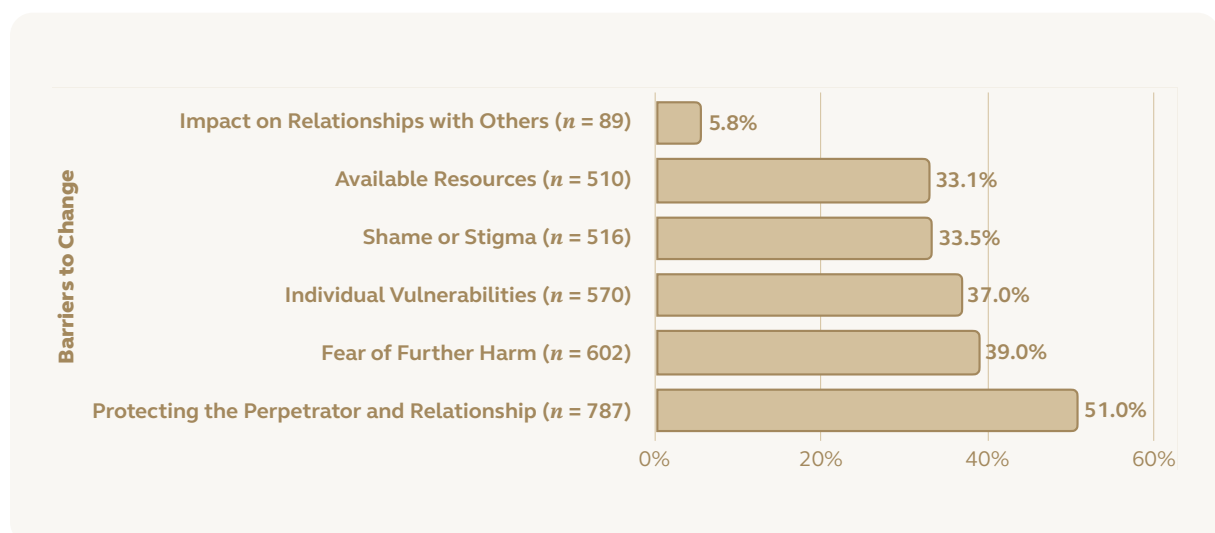


Figure 24. Barriers to change for victims ($n = 1,542$).

⁵ Note. The factors were identified using a principal factor analysis with oblique (oblimin) rotation for the 2021–22 report.

Table 1. Barriers to Change Factors and Frequencies (*n* = 1,542)

Factor 1 – Protecting the Perpetrator and Relationship	
Impact on perpetrator – police involvement	350
Impact on perpetrator – financial	317
Impact on perpetrator – lose relationships with others	309
Fear – lose relationship with perpetrator	273
Impact on perpetrator – homelessness	254
Fear – safety of perpetrator	123
Impact on perpetrator – health/mental health	83
Fear – forced intervention	21
Factor 2 – Fear of Further Harm	
Fear – further abuse	363
Fear – safety of self	308
Fear – safety of others	70
Fear – not be believed	32
Factor 3 – Impact on Relationships with Others	
Fear – lose relationship with grandchildren	61
Fear – lose relationship with other children	28
Fear – lose other relationships	9
Factor 4 – Available Resources	
Lack of knowledge	414
Financial situation	69
Fear – homelessness (self)	61
Factor 5 – Shame or Stigma	
Denial	276
Guilt/self-blame	197
Shame or stigma	127
Cultural factors	55
Factor 6 – Individual Vulnerabilities	
Lack of capacity	370
Support needs	237
Fear – moved into aged care	25



SECTION 3.

Abuse in Consumer and Social Relationships

Although the Helpline focuses primarily on abuse in close and intimate relationships, it also receives calls about abuse in consumer and social relationships.

Some victims were experiencing abuse in both consumer and social relationships, and thus one call may have generated two cases (one consumer abuse case and one social abuse case). Consequently, cases of abuse in consumer relationships numbered 329 and cases of abuse in social relationships numbered 269.

The most common abuse types recorded for cases involving consumer and social relationships were psychological and financial abuse (Figure 25).

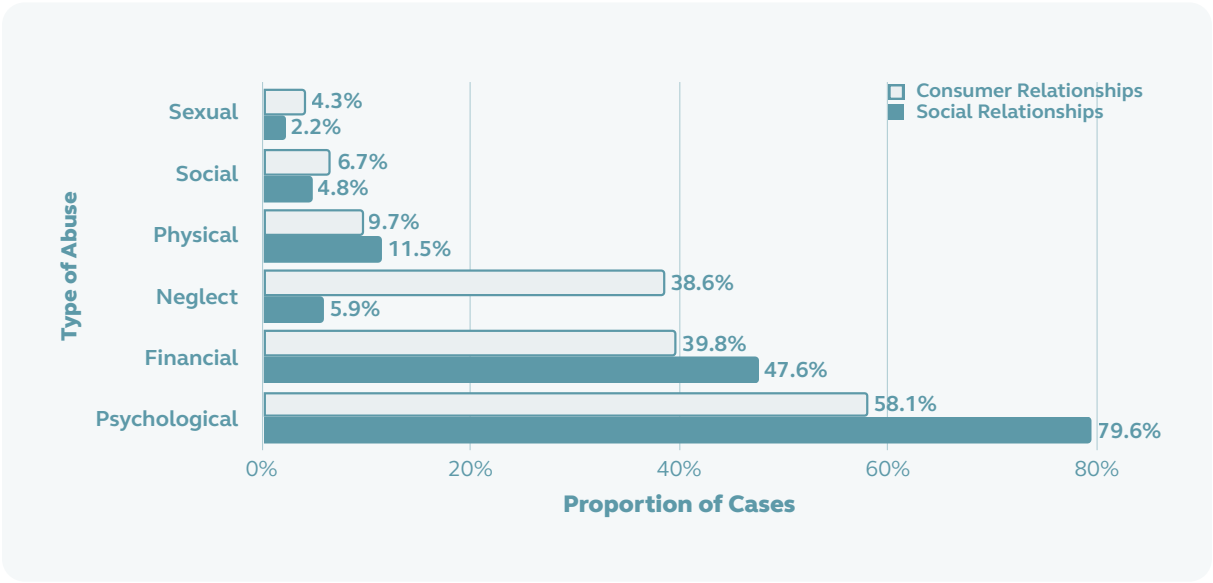


Figure 25. Abuse types reported for abuse involving consumer (*n* = 329) and social (*n* = 269) relationships.



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